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Work of women physicians in Asia.

Stinson, M. H.

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HISTORY OF MEDICINE AND NATURAL SCIENCES

Work of Women Physicians

In Asia,

—BY—

Mary H. Stinson, M. D.,

OF NORRISTOWN, PA.,

READ BEFORE THE

State Medical Society of Pennsylvania,

AT ITS MEETING IN

Philadelphia, 1884.

NORRISTOWN:
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1884.

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Work of Women Physicians in Asia.

In the brief space of twenty minutes, we can note in the chain of events, but a link here and there, by which women physicians were drawn into the work in Asia.

Primitive missionary efforts.

We find a missionary society formed in 1799, to assist in increasing an interest in its work for the heathen, and in raising money for the same, a woman's missionary society was organized in 1801. With the same object "Cent Societies" among women, were active until 1815, when Maternal Associations were established throughout the churches and flourished until about 1842. The missionary society of 1799 emerged into the "American Board of Commissioners for Foreign Missions." Early in whose history it began its efforts to reach heathen women through the labors of single women. In 1817, two ladies were teaching among the Indians. Between that date and 1860, 104 were engaged in the same work, and 36 were teaching in other places.

First women missionary teachers.

Formation of denominational missionary societies.

All Christian denominations had strong convictions of duty toward the heathen. The Baptist Union Missionary Society was organized in 1815. The Presbyterian Church, in order to carry on and extend its missions, obtained a charter in 1837. It had previously founded two missions in India in 1834 and 1835. Another in 1853.

Appointment of medical missionaries.

The Methodist Episcopal Church found it necessary, to enable them to hold property and do business legally, to seek a charter, which was granted in 1839. They sent the Rev. J. S. Humphrey, M. D., to Kumaon, India, in 1857.

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The American Reformed Church sent the Rev. E. C. Scudder, M. D., to South India in 1855.

The Rev. Edward Chester, M. D., was sent by the congregationalists to Madura, India, in 1859.

In order to increase the number of medical missionaries in the socities of Great Britain "A *Medical* Missionary Society" was organized in 1841 in Edinburg, under the supervision of the celebrated physician and philosopher, Dr. Abercrombie.

Beginning of work. Our first missionaries were ordained ministers of the Gospel. They took their wives and families, located stations where grew up their dwellings, a place to preach, a school and an orphanage. The language of the country was acquired and the Scriptures translated into the vernacular of the country.

Women teachers. Soon it was felt that female teachers were a necessity and self-sacrificing, earnest Christian women responded to the appeals for teachers.

First medical college for women. March the 11th, 1850, there was chartered in Philadelphia "The Woman's Medical College of Pennsylvania" with a board of corporators. A faculty was organized, 52 students matriculated and the first class of 8 women graduated as physicians in Dec. 30, 1851.

First ladies medical missionary society. In November, 1851, there was "A Ladies' *Medical* Missionary Society of Philadelphia," formed with Mrs. Sarah J. Hale as president. But few persons were advanced enough to comprehend for what purpose it was needed.

In 1852, Rev. Dr. Dwight wrote from Constantinople, "It is my present belief that a well taught female physician in this place, would find access to the families of all classes of the people, not excepting the Mohammedans."

First medical missionary students. In the session of 1853-54, in "The Woman's Medical College of Pa.," under the auspices of "The Ladies' *Medical* Missionary Society," were two women studying with the purpose of becoming medical missionaries. Emiline Horton and Elizabeth Shattuck were the first women who had decided upon medical missionary work in Asia. Providential circumstances prevented the first from entering that work. She became Mrs. Dr. Cleveland and the first resident physician of "The Woman's Hos-

pital at Phila.," established in 1860. The first hospital in the world, equipped, officered and managed wholly by energetic, philanthropic women. Also the able Professor of obstetrics in "The Woman's Medical College of Penna." and the skillful practitioner so well known in this city. Dr. Shattuck was as one born out of due time. The board of missions of her church would not take the responsibility of sending her, not yet having realized the possibilities in the work of a woman medical missionary. For an account of her career, death and a tribute to her worth, see "The College Story," by Prof. Rachel L. Bodley, A. M., M. D., Dean of "The Woman's Medical College."

Women stirred.

American women beginning to comprehend more fully the misery, degradation, slavery of caste and idolatrous practices, were aroused to fresh zeal in behalf of their heathen sisters, and to a special interest for their education, which led to the formation in New York in 1860, of "The Woman's Union Missionary Society of America for Heathen Lands."

Teachers.

Among the teachers sent to foreign fields was Miss Brittan, who after a year of careful inspection and study of the situation in Calcutta, opened fresh Zenanas and commenced work in 1864 under the name of "The American Zenana Mission." Her plan and work were most admirable. We must quote her in another link.

Favorable circumstances.

The suppression of the mutiny of the Sepoys in 1859, the transfer of the government from the East India Company to the direct authority of the British Crown, the building of railroads, the establishment of an improved school system, dispensaries and hospitals with surgeons and staff of assistants, all tended to assist mission operations.

Results.—Formation of women's foreign missions.

Coincidently or providentially the necessities of the rebellion in our own country, caused women from its one extreme to the other, to pass through scenes and trials that called forth their sympathy, fortitude and endurance. They became conscious of their power to relieve distress, to comfort the sick, the cast down and the sorrowing. Thus there was developed an ability to co-operate successfully and to work collectively. Hence when peace was restored, women were prepared to engage with renewed energy for their oppressed sisters, both at home and abroad.

They also felt that they could work more effectually in connection with their several denominational boards of missions. Therefore at a meeting of the ladies of the Congregational churches in Boston, January 1st, 1868, their "Woman's Board of Foreign Missions" was formed, by only a few women full of faith and zeal, and within that month the board was in active operation. By the 3d of February, $500 were in its treasury and their first woman missionary adopted.

"The Woman's Foreign Missionary Society of the Methodist Episcopal Church" was organized in 1869 by seven women, whose subsequent work seems like magic as now the membership is 90,000.

Dr. Nutting, from Turkey in Asia, when speaking of the women of that country, said, "I am persuaded that in no way can so much be done for their elevation and enlightenment, as by sending out among them well educated, devotedly pious female physicians."

"The Woman's Board of Foreign Missions of the Presbyterian Church" was incorporated in 1870. In 1871 "The Woman's Baptist Foreign Missionary Society" was launched for the support of women missionaries.

Collection of monies.

These societies are the channels through which the collections of money by the various agencies throughout the length and breadth of the land, are gathered for the support of the entire work of women missionaries.

Medical missions.

Medical missions are auxilliaries, whose primary object is the salvation of souls. By their reputation for medical and surgical skill they draw the populace after them, gain their confidence and lead them to say one to another, "You need not be afraid of these missionaries. They are your friends and have come to do you good." Rev. Mr. Corbell said, "Every attempt to get hold of a new city failed until our medical missionaries first won the confidence of the people by healing or relieving them in cases where the skill of the native physician would not avail." Rev. E. A. Moule attributed his success largely to the hospital work under the care of his associate, Dr. Galt.

Women medical missionaries are sent to break down the hitherto impenetrable barrier of caste. The late Dr. Duff, than

whom none better knew the peculiar condition of Hindoo women of the upper classes, when speaking of females having a knowledge of the science and practice of medicine, said, "Would to God we had such an agency ready for work! Soon would India be moved to its inmost recesses." Dr. Duff's estimate.

There are two distinct systems of medicine in India. The Yonani or Greek is practiced by all the Hindoo doctors, called Baids, which means medical science or philosophy. They are disciples of the school of Hippocrates who taught the Greeks their system, long before the Christian era. The Yonani has been modified by the older Aryan and the newer Arabic, introduced about 700 years ago, by the Mohammedan conquest. The Mohammedan doctors are called "hakoom." "These old systems, full of error and superstition, live and thrive, they are fully believed and wrought into the domestic life of the people." Systems of medicine.

Women medical missionaries have to contend with both systems and must have the utmost confidence in their own, and a supreme courage to practice it in the face of much opposition. All confess that the English doctor has marvelous skill in surgery. It is in this that the lady physician will find her widest field of usefulness and become the greatest blessing to humanity. To be surmounted.

During all the past years of missions, the ordained missionaries carried certain medicines when on their circuits preaching in the villages and outstations, and by the distribution of which they greatly increase their audiences. Their wives had miniature apothecary shops and were obliged, not only to medicate their own family, the children of the schools and orphanages, but to give medicine to all the sick who applied for it. Thus these mission wives learned the wants of the women and children by whom they were surrounded. Also that these ministrations secured them admission where even their teachers could not gain an entrance. Consequently they were the first to feel that women physicians were a necessity for the completion of the missionary corps. On preaching circuits. Women taking in the situation.

Native Christians, English speaking government officers, merchants and bankers had grown somewhat into sympathy with mission projects as evidenced when there was an effort made to provide a way to educate native women in medicine, by one of Beginning to comprehend.

these men saying, "it would open the doors of the zenanas as nothing else could."——"Besides this you would save thousands of lives that are now sacrificed through the ignorant and bad practice of native doctors."

Appreciation. Another offered to bear half the expense of educating a class of women in midwifery and medicine, if the government would grant the other half. Application was made. The government officer was in favor of granting the funds, but "there was so much opposition by medical men," (native and English) and so much inevitable delay that the gentleman who made the application withdrew the papers and became responsible himself for the

Action. requisite amount. A class of nine women (there were men also) was opened May 1st, 1869 under the supervision of Rev. J. S. Humphrey, M. D., in Nynee, Tal. After a two years course of study four of this class passed a creditable examina-

Proof. tion, and received certificates of fitness to practice "ordinary surgery and medicine." Early in the same year the Macedonian

Appeal for help. cry, "Come over and help us" was heard, in an urgent appeal to the Philadelphia branch of the "Woman's Union Missionary Society" to send "a full fledged woman doctor" to the mission in Bareilly, India. Here some girls had been carefully taught, hoping that they might have an opportunity to study medicine. They had already acquired a fair knowledge of the English language which was necessary as there are no words in their venacular corresponding to technical medical terms.

Candidate. Dr. Clara Swain, who graduated in March, 1869, in "The Woman's Medical College in Philadelphia," was recommended

Adopted. to and adopted by the "The Woman's Union Foreign Missionary Society." But she being a member of the Methodist Episcopal Church and "The Woman's Foreign Missionary Society"

Transferred in a proper spirit. of that church, having just been organized, Dr. Swain was transferred to its care, under which she sailed November 3rd, 1869, and arrived in Bareilly, India, on January 20th, 1870, and was re-

Cordial reception ceived with much joy by the mission. Prominent, intelligent gentlemen of the neighborhood called to welcome her. One, a native who spoke English very well, said, "we need lady physicians in India very much, and I have often spoken of it to my friends, but we did not know where to look for them, and as our women are un-

educated they could not study medicine. But it seems the people of the West have thought of us and helped to meet our necessity by sending you. Light has again dawned from America." Ah! how much that word America signifies to the oppressed.

Entrance upon medical work.

Dr. Swain was called immediately to visit women and children of all classes in the community, having had in the first six weeks after her arrival 108 patients. She was at once connected with the orphanage and on March the 1st, 1870, commenced teaching medicine to a class of 16 girls and three married women. They studied well, and 13 of this class on April the 10th, 1873, received from an examining board, two of whom were civil surgeons, "certificates of practice in all ordinary diseases."

Class in medicine

Certificates granted.

First year's work.

In Dr. Swain's first annual report, we find she prescribed at the mission house for 1,225 patients. In the houses of the patients, for 250. And she said, "the way continues to open to our work. We have been called to 16 different zenanas."

Dispensary and hospital conveniences had become an absolute necessity. But where could suitable grounds be bought, and could the society at home furnish the necessary means? were questions that caused much anxiety. A Mohammedan, Prince of Rampore, forty miles distant, owned an estate of 42 acres, well adapted for hospital purposes, adjoining the mission property. But as he had been decidedly opposed to Christianity, they had no hopes that it could be purchased at any price. However the Commissioner advised the missionaries to ask his Highness upon what terms the property could be bought for a hospital for women and children. This they did in October 1871. To their astonishment and joy the Nawab said, "Take it, take it, I give it to you with pleasure for that purpose." This gift was worth at least $15,000. A dispensary building was ready for use by May the 10th, 1873, and the hospital completed on January the 1st, 1874, at a cost of $10,350, all of which was furnished by "The Woman's Foreign Missionary Society of the Methodist Episcopal Church," except $350 collected in India.

A generous Prince.

A handsome gift freely given.

Dispensary and hospital cost.

Dr. Swain was assisted in her medical work by some of those who had received the "certificates" and by native medical students. The dispensary cards were printed in Hindoo, Persian and Roman Urdu characters. From the 10th of May, 1873 to

Assistants.

In ⅔ of a year.

the 31st of December the same year, 1,600 patients were treated in the new dispensary.

Encouraging circumstances.

Dr Swain, when speaking of the sick in the zenanas, said, "my heart is encouraged by their eagerness to hear and to be taught. They beg for our books and ask us to come every day." Morning prayer to their false Gods and idols is the national custom of both the Hindoo and the Mohammedan.

During 1874, 50 new families called for professional services and all desired to have a teacher. The number of dispensary patients exceeded 3,000, with 150 out-door patients.

Conclusion of those who had watched the work.

Dr. Swain's reports of her medical work read like fairy tales. A friend at the mission, wrote, "The Lord has had the matter of women medical missions in His own hands from the beginning." "Dr. Swain is a grand success."

An example of the work of women medical missionaries.

This minutia of the first four years work of a woman medical missionary, without any interest of incidents, must serve for the work of all following women medical missionaries in India. All had similar trials and successes, but not to the same extent. No other woman physician in India but Dr. Swain has taught native women students in medicine.

Slow growth.

If time permitted, I should like to tell you of the discussions in the conferences of the missionaries from year to year, so that you might realize how slowly even some of these men grew to know the importance of female education and woman's medical missions.

Not until 1872 do we find women in these conferences with papers. But in the conference in Allahabad of that year Mrs. Winters, the wife of a missionary in Delhi, read a paper on "Female Education," and Miss Brittan, one on "Zenana Missions."

Mrs. Winters.

In the course of her article, Mrs. Winters said, "I would venture to urge the conference not to discuss the question of missions to women, but to spend the time thus saved in silent prayer to God for money, women and above all, love." "I beg the conference with one voice to appeal to America, Germany and England for aid." "We ask for the flower of the ladies' colleges, the best nurses from the hospitals." "We ask not an army of zenana teachers; the best missionaries I have known have been Eurasians (Anglo-Indian) and natives. Why should we despise the

workers God has put ready to our hands? We want from home a few picked women, who will take the higher subjects and train these nurses and deepen their spiritual life." "I left Bengal, after a four years work, with an intense love for the Bengali women and with the conviction that with Christianity they would become equal to the best cultivated women in the world."

Importance of work in zenanas.

Miss Brittan, in closing her address, said, "I believe the work among the women of India to be the most important mission work in India. The men had to be educated up to a certain point before they would permit their women to be taught, but now, since that has been done, they are anxious to bring their women up to themselves; depressed, debauched and degraded as woman is here, she is an almighty power for evil; the influence of the wife is little; that of the mother unbounded, and as long as that is only for evil, what hope can there be for the youth of India!"

Miss Brittan's paper was read by Rev. Dr. Murray Mitchell.

Papers on medical women missionaries.

At the same conference in 1872, there were read two papers on medical missions by Rev. J. S. Humphrey, M. D., and Colin Valentine, Esq., M. D. Female doctors were discussed for the first time in a conference in India. In answer to supposed impossibilities, Dr. Humphrey said, "It has been demonstrated beyond a doubt, that we can educate the women even, and when educated that they may become useful and efficient practitioners." . . "We need something like what is required at home, to make physicians and surgeons." . . "In case of both men and women."

Dr. Humphrey's opinion.

Dr. Valentine's proposition.

Dr. Valentine said, "When I first drew up this scheme for a medical missionary training institution, a few years ago, there was not a single female medical missionary in India." . . "No provision was made for female students, now, however, there are female medical missionaries in the country, with a prospect of a large accession to their numbers, I would propose to the conference that the opening of female classes form part of our scheme."

Progress in public opinion.

Eleven years after this proposition of Dr. Valentine we find in a Calcutta newspaper, the *Indian Witness*, of October 27, 1883, the following communication: "As there is a demand for medical zenana workers in Northern India, it may prove an item of interest to some, that government has opened the

Agra Medical School to women. A small class of native women are now in attendance. These are supplied with scholarships from the government; and under certain conditions private female students may have access to all the lectures and after a course of three years may be graduated. It should also be known that the Agra Medical Missionary Training Institution, organized through the efforts of Rev. Dr. Colin Valentine, proposes to provide scholarships for Native students, male and female, who may wish to pursue a medical course in Agra. Further, the Rev. J. M. Reid, D. D., Secretary to the Missionary Society of the M. E. Church, U. S. A., proposes to become responsible as far as necessary for Methodist Native students of either sex, who have been properly recommended, may in connection with this institution come to Agra to attend the Medical School. We have to thank Mr. H. Dear, of Monghyr, and other gentlemen for scholarships supporting several lads in attendance at the Medical School. But we urgently need additional funds to be used as scholarships for Native Christian students of either sex who may wish to gain a medical education and for whose maintenance no provision has been made. The new year in the Agra Medical School begins on the first of June, 1884. . . "It is thought that scholarships for girls should be ten rupees per month, which would pay, not only for their boots, clothes and food, but also for a matron to accompany them to and from the lectures. Scholarships for the boys should be eight rupees monthly."

A matron still necessary.

Strong testimony

Rev. Dr. Scudder, M. D., in the conference of 1872, said, "I wish to add my testimony to the great value of medical missions as an evangelizing agency. I come from a medical stock and therefore feel as if I had a right to speak in the matter. My father labored as a missionary physician in India for 35 years and bore testimony to the value of the medical work, ragarding it as one of the best means of reaching the people. My own experience, too, extending over a period of 17 years, is to the same effect." . . "I should like to say just a word about this new movement, the introduction of medical ladies into missionary work. I am very glad to see it, and at the same time sorry to refer to the matter in which the medical students in 'The University of Pennsylvania' and in Edinburgh dis-

graced themselves by their opposition to lady students. It is gratifying to know that this has been overthrown and that the ladies are taking the place they deserve to occupy." . . . "They can enter into families where male physicians are forbidden access. I do not mean to say that the latter are entirely excluded, but on the other hand there are many cases in which native women would rather die than admit a male physician."

Since 1869 there have been sent to India 15 women medical missionaries; one for each year since that time: Number of women medical missionaries who have been in India.

By The	Amer. Bd. of Comrs. for For. Miss. (Congits.),	1
" "	Woman's Bd. of For. Miss. of the Pres. Ch.,	1
" "	" " " " " M. E. Ch.,	5
" "	" Union Miss. Society,	2
" "	Lutheran Church,	1

I have received replies from five of these medical missionaries to inquiries concerning the diseases of women and children. The diseases of the latter seem to be about the same as with us, but of a milder type. They do not mention scarlet fever or diphtheria, but eczema is much more common, and there is some leprosy and dengue among them. Concerning the age of puberty, it was difficult to be exact, as few know their ages, but nine to fourteen years were the extremes mentioned. Mothers of thirteen and fourteen years were common. Their children were very small, but appeared healthy. Infant marriages were deplored. There are now in India 21,000,000 of widows, many of whom are widows by the death of the boys to whom they were betrothed in early childhood and were never married, but they have to live under all the abuse and cruelties that are permitted to be heaped upon widows. Children's diseases. Puberty. Widows.

Labor was considered tedious and painful as a rule. Two reported the employment of midwives to be so universal that they had not been called to such cases. Nature of labor.

Rupture of perineum was very frequent, that of the cervix uteri little less frequent. Diseases peculiar to women were of the same general character as at home, but aggravated by bad treatment during and after parturition and by subsequent neglect. Diseases of women.

Neuroses and insanity do not appear to be very common. Puerperal cases had been seen. Hard work and an undue anxiety Insanity.

to be mothers of sons, were given as possible reasons thereof. The birth of daughters is a dire calamity.

Care of insane. To the question, "What provision is made for the care of the insane?" came, "Hospitals are provided." "The provision by the English Government is very primitive." "Government asylums badly kept."

Dr. Anna S. Kugler, late assistant physician in the Woman's Department of the Southeastern Hospital of Pennsylvania, who had been only a short time in Guntoor, India, had learned of but one hospital for the insane in Southern India, which was located in Madras. This she had visited and was much pleased with its management, and where they were having excellent results from the open door system.

In 1874, we should note two events: "The Medical Prayer Union" was established in London; which in 1878 numbered 220 doctors and medical students; who met weekly for prayer and the study of the Bible.

London school. Also, when the University of Edinburgh was closed to women, the remedy was sought in the founding of "The London School of Medicine for Women," which was opened in October, 1874. Obstructionists prevented women being admitted for examination by the various medical boards until 1876, when an act to empower all medical boards to admit women, became law.

Initiative. "The Irish College of Physicians" took the initiative and within the last seven years 38 women have obtained diplomas from this college.

Success. In 1878, the University of London, after a severe contest among its members, agreed to admit women to its medical degrees. This led ultimately to their admission to all the faculties and "it is understood that, when certain new arrangements are completed between the Royal College of Physicians and Surgeons of England, the admission of women to their examinations will be included in the programme, and this event will certainly give the final blow to the policy of male monopoly in medicine."

Study and examination. The course of study and of examination is very protracted in the University of London, and "it is a very great satisfaction to be able to record that already three women have graduated as

"M. B. Lond."; and that in two cases, the golden medal of the University has been awarded to a woman, after competition with all the students of the year." . . "In anatomy to Miss Helen Prideau in 1881, and in obstetrics to Mrs. Scharlieb in 1882." Honors.

One of these graduates of the London School of Medicine for Women, Miss Jane E. Waterson, M. D., is the first woman medical missionary sent into Africa, "that garden of the Lord in the wilderness, where the worship of God has been begun, schools opened, the slave trade suppressed, and the faith of the natives won." Africa.

Four of these graduates are practitioners in India: Bombay, Calcutta, Lucknow, and Madras. Four women M. Ds.

A philanthropic citizen of Bombay has collected £26,975, and has the promise of £13,504, for the purpose of founding a hospital for women and children, the expenses of conducting the same, and to pay the salaries of one or two lady physicians. A large and influential committee, representing every section of the community, was organized for the purpose of promoting the object in view. This committee have invited Dr. Edith Pechey, a graduate of Berne, but registered in London, to enter upon practice in Bombay and to take charge of the Hospital for Women and Children, "with a liberal salary and excellent residence." The corner stone of the hospital was laid with great eclat, by H. R. H., the Duke of Connaught. Good collector. Complimentary invitation.

"While a majority of the Calcutta Medical College consider that the requirements of the country point rather to the provision of educated midwives and nurses than to full-blown lady doctors, the Government of Bengal has assumed the responsibility, and thrown open the Medical College and Hospital to females. One young lady, a B. A. of the Calcutta University, is now enrolled as a regular student. Just and right.

"In Madras, lady students were admitted to the Medical College in 1875 under special rules." One of these ladies was Mrs. Scharlieb who obtained the "M. B. Lond.", of the London University and its gold medal in 1882. It is now proposed to place her at the head of a hospital for women and children in Madras. In advance of Great Brittain.

Liberal and wise. "Women in India have obtained liberty and encouragement to qualify themselves, under the same circumstances and advantages as men, for the practice of the profession of medicine, and the State is prepared to sanction their doing so."

General interest manifested. "The Woman's Foreign Missionary Society of the M. E. Church" has voted to raise $25,000 for the establishment of the first woman's periodical in India. David C. Cook, of Chicago, has given a $2,200 Cottrell steam printing press to the *American Mission Press* in India. This will be the first steam-printing machine, except those of the government, in use in India.

Knew whereof he spoke. Sir John Lawrence who entered the lowest class of the English civil service in India in 1830, and rose through all its gradations, to be Viceroy in 1863, said, "I believe, notwithstanding all that the English people have done to benefit India, the missionaries have done more than all other agencies combined."

BURMAH.

Adaptability of medical missionaries to the work Rev. E. P. Dunlap, of Siam, when urging an increase of the number of medical missionaries, wrote, "even while the heathen through prejudice stand aloft from the preacher, they will seek the physician more and more after he has performed some of those cures, which, to them, seem almost supernatural."

Medical women needed. There are but two woman medical missionaries in all British Burmah, both under the Woman's Baptist Foreign Missionary Society. Mrs. Dr. Douglass, in Ragoon, who is turning her medical work to good account as a means of access to the people. "Oh! for workers among the Burmans." . . . "There is an eagerness to hear the living word among the dwellers in the jungles."

Efficient medical assistant. In Maulmain Dr. Ellen E. Mitchell has been assisted by a native christian, Dr. Shaw Loo, who has greatly relieved her in some departments, and reached families, both as a physician and as an evangelist, in a way which she could not. Her patients were from eight different nations, or tribes, with almost every

Diseases. disease that could be mentioned, though fevers, ophthalmia, coughs, rheumatism, diarrhœa, dysentary and various skin diseases were the most common complaints. Nearly the whole

work has been gratuitous. "Medicine has done much towards opening doors otherwise closed to us."

CHINA.

Location of missions.

The portion of the great empire of China into which women medical missionaries have been sent, lies along the Eastern coast at intervals from 23° to 41° N. Latitude. Peking, the capital, being 40°; and in but 10° of its 40° of longitude. We are not aware of any regular system of medicine in China. Medical knowledge is rather an heirloom.

No system of medicine.

Knowledge of the virtue of certain remedies is handed down from sire to son and maintained a secret, thus producing specialists in the use of herbs, skins of reptiles, charms, amulets, superstitious and idolatrous practices. Regular medical education is unknown, yet every scholarly man is more or less a physician. The Chinese know nothing of hygiene. Filth and vermin encompass them as with a garment.

Medical missionaries sent to China.

The London Missionary Society sent Robert Morrison, a practicing physician, to China in 1805. In 1829, Dr. Colledge was stationed in Macao. The Scotchman Dr. James Henderson's medical work in Shanghai, is one of the most interesting on record. The American Board of Commissioners for Foreign Missions appointed the Rev. Peter Parker, M. D., a medical missionary in 1834. He opened an ophthalmic hospital in Canton, which was the forerunner of all subsequent hospitals.

Twenty-eight years in China.

In 1844, the Presbyterians founded a mission in Ningpoo with Dr. D. Bethune McCartee, of this State, as medical missionary, who remained in China until 1872. He then removed to Japan for some years and now has returned to this country. Dr. McCartee informed me, that he had never heard of a case of scarlet fever or diphtheria during his residence in China. He had never been called to more than four or five obstetrical cases in all that time. He had sent preparations of ergot in cases of flooding and only prescribed in women's diseases at second hand.

Treatment of Insane.

Restraint, "chains and cells in the houses of relatives" was the only treatment for the insane he had ever heard of.

The mortality of parturient women was large. "A female physician would of course have a great advantage among those of her own sex in China, over a male physician."

Women not reached. Another Presbyterian Mission was established in Canton in 1854, with Dr. John G. Kerr as medical missionary. Owing to the peculiar social customs of the Chinese and their views of propriety, men medical missionaries have done nothing, comparatively for suffering women.

Commencement of woman's medical work. Woman's medical work was begun in Peking in 1873 by Dr. Lucinda S. Combs, sent by the Philadelphia Branch of the Woman's Foreign Missionary Society of the M. E. Church. Dr. Combs prosecuted her work in the midst of great difficulties, but with much success in winning the hearts of the Chinese women. During the first year she prescribed for 314 cases and 37 were treated in their own homes. In closing her report, she says, "I have treated with general success a sufficient number of cases to make me feel that the work is well begun."

Hospital built. A hospital building was completed in 1875, by which time she was able to do without an interpreter. In the annual report of 1876, I find, "the medical work in charge of Dr. Combs is eminently successful. She is kept exceedingly busy with out-door, as well as hospital practice." "Many would have been discouraged by the difficulties to be overcome in establishing medical work, but Dr. Combs' love of her profession, her untiring

Medical work approved. zeal and her unwavering faith" . . "have carried her triumphantly through the pioneer years of a medical missionary." . . "Medical work has won its way through her quick, persistent methods in this old heathen capital." . . "After nearly five years of efficient service she moved to Kiu Kiang."

Dr Combs' successor. Dr. Combs was followed by Dr. Leonora Howard, a graduate of Michigan University. She took charge of the hospital in July, 1877. In May, 1878, Dr. Howard wrote, "from July, 1877, to March, 1878, during these months, dispensary patients numbered 1612, out-door patients 50, and ten have occupied the wards." . . "Among the out-patients I have found many in a very destitute condition, having neither food, fire nor clothing." . . "The people invariably treat me with respect and seem

Trying circumstances. grateful for the smallest favors." . . "About this time, famine prevailed throughout North China, when many thousand natives died, pestilence followed." . . "A number of missionaries were seized with the malignant fevers and died." Dr. Howard wrote, "There has been a great deal of sickness among

the missionaries, and for a time I was the only physician in Peking. I did not fear the contagion, though it was terrible. We could hardly go on the streets without seeing the dead and dying lying just where they happened to fall." . . "The last three months have brought sad days to the North China mission." The report said, "Dr. Howard's courage never failed her in all these days of trial when death was on every side, but her physical powers were greatly taxed." She reported "2,015 day-patients, 80 out-door patients, and 18 having occupied the wards for the entire year."

No woman M. D. ready to fill the place.

In the Fall of 1878 medical work was suspended in Peking, by Dr. Howard being called to Tientsin, the seaport of the province 80 miles distant by land and 120 miles by water.

Change of location.

The way for this change was brought about by providential circumstances beyond her control. When Gen. Grant and his party were visiting in Tientsin, in June, 1878, they were entertained several times by the Viceroy, Li Hung Chang, the Governor-General of the province, next in authority to the Emperor and the leading statesman in the Empire. His wife, Lady Li, gave an evening entertainment to the wives of the resident officials. A lady of the mission accompanied Mrs. Grant as interpreter. When a few weeks later Lady Li was very ill, and given up to die by the native doctors. The Viceroy, being in sore distress at the prospect of loosing his wife, in opposition to the prejudices and principles of the Chinese, yielded to the persuasions of the United States Consul (who was the private secretary of the Viceroy,) and sent for the foreign physician of the city and the medical missionary of the London Missionary Society. These carried Lady Li safely through the immediate peril, but they, as men physicians, could not diagnose the case of a lady patient. Both doctors united in petitioning the Viceroy to send for Dr. Howard, and the possibility of saving his wife's life, enabled him to set at naught all Chinese ceremonies. A courier was dispatched with a request to Dr. Howard to come; and a steam launch sent to meet her to hasten her arrival. Happily the disease of Lady Li yielded to the medication of Dr. Howard, and soon Lady Li learned not only to appreciate Dr. Howard's medical skill, but to feel for her a tender regard. Strong inducements

Influence of personal association.

Supremacy of love.

Gratitude.

were held out to persuade Dr. Howard to remain at Tientsin. Apartments were fitted up in one of the temples of the city for a dispensary by the Viceroy, and Lady Li became responsible for its support.

Dr. Howard's associate wrote, "We know not how much this is for China, but it looks like a big wedge in very near the throne."

Medical work in the commercial capital.

Dr. Howard wrote, March 21, 1879, "I commenced work in the dispensary about the middle of October, 1878. Up to the present time I have treated 810 patients in the Temple and visited 120 patients in their homes." . . "I live about three miles from the temple, in the foreign settlement where I have treated over 1,000 patients and have visited 17 patients in their houses. We consider this the most important part of our work."

Change of custom.

. . "I am called to the houses of the highest officials; their prejudices are breaking down everywhere over the land." . . "Patients come from the interior and take up their residence near the temple, that they may be treated."

Strong testimony

Rev. H. H. Lowery wrote, "The importance of the present opening can scarcely be overestimated. Dr. Howard's attendance upon the Viceroy's wife, has made an opportunity such as never occurred in China before, and if lost now, may never occur again. The homes of many of the best and most influential of the City are open to the visits of your physician."

Dr. Aker was sent to Dr. Howard's assistance in 1882. In the annual report for 1883 was found the following numbers:

Of patients in wards - - - - - -	92
" out-door patients - - - - - -	903
" Mission dispensary - - - - - -	8,337
Prescriptions given - - - - - -	29,657

FOOCHOW.

In October 1874, Dr. Sigourney Trask, of Spring Creek, Penna., a graduate of the "Woman's Medical College of the New York Infirmary," was sent to Foochow by the New York Branch of the Woman's Foreign Missionary Society of the M. E. Church. The number of patients treated the first year was

A great financial effort accomplished.

584, and 38 surgical operations. In April, 1877, a commodious, well arranged hospital was ready for use. The first patient reg-

Surgical cases.

istered in it was a woman of 28 years, who had not walked erect

for 5 years on account of an injury to her knee. This resulted in anchylosis with flexion at nearly a right angle. Dr. Trask made a resection, the limb was straightened, a good recovery made and in three months the woman returned to her home, 60 miles from Foochow.

A little girl of 15 years, had both legs amputated below the knees successfully. The mother of this girl's betrothed husband was greatly disturbed by her recovery.

A pretty, bright young woman with bound feet, having a terribly ulcerated leg, was improving so that Dr. Trask hoped amputation would not be necessary.

A large tumor having been removed from the back of a woman her husband said, "I had made offerings to many Gods, but all to no good to my wife."

Concerning another who had her right arm amputated, Dr. Trask said, "I have but little hope for her." . . "I do not think her friends will mourn very much, but rather rejoice."

Epidemic of cholera.

In 1878 Dr. Trask wrote, "We have had almost 20,000 deaths of natives here in two weeks from cholera. It is a most malignant type." . . "During the last quarter, I had 267 dispensary patients and over 500 prescriptions have been made." The whole number of out-patients registered since 1877 is 1,208. Number of patients admitted into the wards of the hospital was 78.

Native women students.

In 1878, Dr. Julia A Sparr, a graduate of Michigan University, was sent to reinforce Dr. Trask. Seven years ago Dr. Trask received under instruction the first female medical student in Foochow—the first ever in China. Since then five others have been received,—six now being under instruction. Letters have been received by the society, asking that at least one of these, Hu Keng Eng, of whose ability, aspirations and devotion, Dr. Trask speaks of in the highest terms, should be brought to this country to remain ten years, if necessary, in order that she may go back qualified to lift the womanhood of China to a higher plane, and there to superintend our medical work; and this young student herself sends an earnest petition to be brought to America. "Shades of conservatism and Confucianism!" avaunt.

She has arrived and is to take a 4 years collegiate course before commencing the study of medicine

Dr. Catharine Corey was added to the medical staff in Foochow in 1883.

In the annual report of the mission for 1883, I learn woman's medical work grows steadily in interest and favor in Foochow, as seen in the following table:

	Patients.	*Surgical Operations.*	*Deaths.*
Hospital Dispensary - - -	1,051	66	——
East Street " - - - - -	1,644	134	——
Bedside - - - - - - - -	262	60	——
House - - - - - - - -	58	26	2
	3,015	286	2

Report of a year's work in a station established 30 years.

We gather from the annual report of 1883 of the Presbyterian Board of Foreign Missions, that in Canton "another hopeful feature here, is that it is reaching the women." . . "Three women from the school have commenced christian work, and one has entered upon the study of medicine." . . "The hospital work under Dr. John G. Kerr, has been greatly prospered. He has had 19,199 out-patients, 1,132 in-patients and has performed 963 surgical operations. During a part of the year, Miss Mary E. Niles, M. D., of the Nanking mission, was under his special instruction. Miss Butler is studying medicine and several natives also have formed a class."

You will remember Dr. Kerr went to Canton in 1854. Almost a generation had passed before "reaching the women." We are happy to know that the men medical missionaries have welcomed cordially the women physicians to their stations. But I have not noticed any other doctor than Dr. Kerr taking a newly arrived woman medical missionary under his "special instruction."

Infanticide.

We learned upon inquiry of a member of the Baptist mission in Swatow, (Miss Adele M. Fielde) nearly in the same latitude but a little East of Canton, as to the frequency of infanticide; that she had known:

100 mothers who had destroyed 158 female children, other.
40 " " " " 78 " " "
6 " " " " 11 " "

Modes of death.

When the mother does not strangle or smother her child by holding a cloth over its face, or by filling its nostrils and mouth with cotton, saturated with incense, the child is wrapped in mat-

ting and carried by the the father and thrown into the river, or into the little window of a walled pit prepared for the reception of female children, where lime is thrown over them. No one asks how the child came to its death. Boys are never destroyed. "A husband reviles or hates his wife if she does not bear sons, and may be legally divorced.

Dr. Caroline Daniels, was sent to Swatow in 1879 by "The Woman's Baptist Foreign Missionary Society and is laying the foundation for woman's medical work.

Dr. Virginia C. Murdock, a graduate of Michigan University, under the auspices of "The American Board of Commissioners for Foreign Missions" in Kalgan, on the mountains, answered my questions fully, but her letter was received too late to allow of but a few quotations. She says infanticide "is not practiced to any extent." . . "The death of sons is a sore affliction, that of daughters a good riddance. Small-pox is considered a regular disease of childhood. A son who has not been vaccinated is not counted as having a lease of life that can be depended on. None would think of having a girl vaccinated. If a cherished son is sick, a doctor is called, but with girls, it is the "survival of the fittest." Cholera-infantum is very frequent and fatal. If a mother cannot nurse her child, a wet nurse is hired. No other way to raise children is attempted. People do not seem to have the patience to care for their sick babies. Burial of the dead is general, but dead female children are often wrapped in a mat and thrown into the street at night so that dogs may tear them to pieces, hoping that thus their little spirits will be liberated and come back to the parents as sons."

How differently children of the two sex are valued.

Modes of disposing of the dead.

Chinese midwives are quite efficient ordinarily, but in unusual presentations and flooding their arts are at an end. Forceps are not permitted to be used in that locality. Dr. Murdock had been called in cases of post-partem hemorrhage, in one of which she found the woman fainting, but held up by the hair of the head, it being dragged upwards by the husband and brother taking turns as they became fatigued. No advice or inducement could make them let go of her hair and allow her to lie down for an hour or two. She lived through it, but as they thought, only because they adhered to their well-known theories.

Obstetrical items.

A lying-in woman must not leave the house for forty days after her delivery, and must live on slop food all that time. Amenorrhœa was the most frequent disturbance of the menstrual fuction.

General diseases. Coughs, bronchial and asthmatic with shortness of breath very frequent. Dyspepsia is universal. "Worms! worms! to be treated for round worms is everybody's fate." Skin diseases and ulcers of various sorts are common. Rheumatism, acute and chronic, is not as frequent as might be expected, as the natives wear cotton hose and cotton shoes the whole year, and as their houses have brick floors.

In the Annual Report of the W. U. M. S. for 1883 I found among their "noteworthy" events, the opening of their medical work in China, in their established mission in Shanghai, by the

Dr. Reifsnyder's arrival. arrival there on Sept. 1, 1883, of Dr. Elizabeth Reifsnyder, a graduate of the Woman's Medical College of Pennsylvania, who, in addition to the regular instruction and practice in the Woman's Hospital in Philadelphia, had, by a residence of some months in the women's department of the Hospital for the Insane of the Southeastern District of Pennsylvania, also an opportunity of studying the varying conditions and phases of insanity and their treatment.

Medical missionary. Dr. Boone had invited Dr. Reifsnyder to visit his Hospital. She accepted the invitation gladly, and had already seen him perform several operations. She hoped to spend a short time each week in Dr. Boone's Hospital and thus gain a knowledge of some of the diseases with which she would have to contend. She would at the same time make acquaintances among the Chinese.

Trained nurse. Dr. Reifsnyder was accompanied by a graduated, trained nurse. Another first step forward in the right direction. I understand each woman physician now under appointment as a medical missionary is seeking a congenial trained nurse to accompany her and to assist in the medical work.

Gifts. Another most "noteworthy" event was the gift of $5,000 by Mrs. Margaret Williamson to build a hospital in connection with this Mission.

Endowments. A second gift of $1,000 to endow the first beds in the hospital to be known by the name of the generous giver, "Julia Cummings Jones." The giving of $100 on the price of the land for

the site, by Mrs. Wae, an influential Chinese lady from whom it was purchased; who, also volunteered to solicit subscriptions among the Chinese for the hospital. Among the larger annual donations by different ladies I noticed the sums of $136, $234.50 and $500.

In the Report for 1882 of the W. U. M. S. I find a legacy of $40,000, bequeathed by Mrs. Jennie McGraw Fiske, of Ithaca, N. Y., $20,000 of which was to be kept in trust, the income of which was to be given equally to India and Japan. The other $20,000 to be used where and whenever most needed. Also a bequest of $200 by Mrs. Mary Hopkins, of Fairfield, Conn. "Every penny of this money (Mrs. Hopkins') had been consecrated by earnest prayer for the welfare of the W. U. M. S." Legacies.

Women with large estates in this country have bequeathed munificent sums to institutions for the benefit of men and I note such beginnings of legacies as have been received by the W. U. M. S. to draw the attention of other women to these societies as worthy to receive similar bequests. Proper thing to do.

Forty women medical missionaries have graduated as follows:

In the Woman's Medical College of Chicago - - - - - - 6
" Michigan University - - - - - - - - - - 6
" Woman's Medical College of the New York Infirmary - - 6
" Woman's Medical College of Pennsylvania - - - - 20
" Medical College of Cleveland Ohio - - - - - - 1
Homeopathic - - - - - - - - - - - - - 1

The W. F. M. S. of the M. E. Ch. have sent to India 7, to China 10, to Japan 2.
The W. F. M. S. of the Presby. Ch. have sent to India 2, to China 3.
" " " " " " "Lutheran " " " " " 1.
" " " " " " "Baptist Ch. " " "Burmah 2, " 1.
" Am. Bd. of Commrs. for F. M. " " "India 2, " 2. Turkey 1.
The W. U. M. S. of America for Heathen Lands have sent to India 2, China 1.

There are 8 graduates of the Woman's Medical College of Pennsylvania under apointment:

One for Damascus by the Episcopal Church.
Five for China: 1 by the Episcopal Board, 1 by the Methodist Church South 1 by the Baptist Church South, and 2 by the Presbyterian Board.
One not determined whether India or China, and 1 not determined whether Burmah or China.

There are 8 under-graduate misssonary students in the class in the Woman's Medical College of Pennsylvania.

As business men judge of the plausibility of a projected scheme by the amount of money that can be raised for its advancement, I thought it might be satisfactory to know what amount these Woman's Foreign Missionary Societies have collected during 1882–83. I have had access to the treasurer's report of but four societies, from which I copy the following:

Woman's Union Miss. Society for Heathen Lands for 1882–83,	$ 53,831.50
" Baptist Foreign Missionary Society " "	59,670.21
" Foreign Miss. Society of the Presby. Ch. " "	125,186.40
" " " " " M. E. " " "	126,823.33
Amount of appropriations of the M. E. Ch. for 1883–84,	167,037.50
Amt. received from all the W. S. of the Presby. Ch. for 1882–83,	192,729.33

A few days after "Work of Women Physicians in Asia" had been read in the State Medical Society meeting the Rev. F. F. Ellinwood, D. D., one of the secretaries of the Board of Foreign Missions of the Presbyterian Church, when addressing the General Assembly of 1884, said, "we thank the women of the church who have contributed through their societies (during the past year) over $200,000, and who, in individual gifts have added not less than $50,000 more."

Prefatory and Suppletory.

When its was suggested by an honored member* of this State Medical Society, that the writer prepare a paper on the "Work of Women Physicians in Asia," she sent the following request and questions to all the Women Medical Missionaries whose addresses she then had:

Dear Doctor:

Having been requested to prepare a paper on "The Work of Women Physicians in Asia," to be read in the meeting of the State Medical Society of Pennsylvania, to be held in Philadelphia in May, 1884, I feel obliged to ask you ladies in this work to give me something of your experience as medical practitioners, with your clinical observations of the peculiarities of these patients, their special diseases and of the actions of medicines upon them. Also of their superstitions, and the obstacles that oppose your entrance into the homes of women.

Permit me to propose the following questions:

1. What of the children and their maladies?
2. About what age does puberty occur?
3. What is the character of Labor in women of Asia?
4. How often have you found laceration of the perineum? and cervix-uteri?
5. Are the diseases of the reproductive organs of women of the same character and frequency as in the United States?
6. What of nervous disturbances: is insanity common?
7. What is its most prolific cause?
8. What provision is made for the care of the insane?
9. What disease have you most frequently to combat?
10. By whom are you most valued and best compensated?
11. What impression does your position and work make upon the community generally.

From five (5) of these in India she received more or less full replies. From two (2) in China very full answers, but too late except to make a few quotations from Dr. Virginia C. Murdock's.

*Dr. Hiram Corson.

Dr. Mary A. Holbrook's was not received until after the paper had been read. Dr. Trask acknowledged the reception of the questions, but knew there was not time for the transmission of replies before the date for reading the article.

She is indebted to the above and the Report of the "General Missionary Conference held in Allahabad, India, in 1872-73;" to "Protestant Missions," by Dr. Christlieb, of Boon University, Germany; to "Woman's Medical Work in Foreign Lands," by Mrs. J. F. Gracey; to "The Report for 1883," and the "Retrospect of the last seven years of the National Association (of Great Britain) for Promoting the Medical Education of Women," by its Hon. Treas. Dr. Sophia Jex Blake; to the Annual Reports of the several Denominational Boards of Missions and to the different Secretaries of the different W. F. M. Societies for the facts embodied in the "Work of Women Physicians in Asia," and to all of whom, for the kindness rendered she returns her hearty thanks.

The accompanying table contains the names of the Women Medical Missionaries, the medical school in which each graduated, the date of their appointment, by what society adopted, to what station sent, by whom supported, and the former residence of each. It will be seen that these are under nine distinct mission boards. There may be other denominations who have Women Medical Missionaries, but the writer has no knowledge of their whereabouts.

Several Women Medical Missionaries, by marriage have severed their connection with the Woman Societies. Those who married Rev. Missionaries and continued in medical work are supported by the "Parent Society."

It may be interesting to some not familiar with the management of these Woman Boards of Foreign Missions to know that they furnish "an outfit" sufficient to cover all the expenses of the Missionaries until they are located in the Mission Station to which each has been appointed; thereafter the Medical Missionary receives a salary the same in amount as the principal teachers. All under the W. Baptist F. M. S. receive $500 per annum. Those under the W. F. M. S. of the M. E. Church receive $600

per annum. (These were the only societies in whose reports the expenses were itemized so that the salary of each employe' could be learned at a glance.)

It has generally been thought best that medicines and medical attendance should be free gifts to the people, to avoid the possibility of having a mercenary motive ascribed to the medical missionary. All are allowed to accept presents offered in gratitude for benefits received, but these must be turned into the treasury of the mission for the use of its medical department. In some sections the gift of living animals is considered more valuable than silver or gold as an evidence of the appreciation of a favor. Dr. Virginia Murdock said, "The poor give of their poverty, the rich of their plenty; but both give as little as they can, and value the foreign physician not only for his superior skill but because they can get their treatment and medicine without paying for them."

Medical missionaries are most valued by the native christians, by those who have been restored to health, and by those who have witnessed cures of diseases that were incurable by native medical skill or processes.

While patients and their friends who accompany them are waiting in the dispensaries for medical attention, all are taught Bible truths by a competent teacher or bible-woman, or a native christian preacher. Thus the sick are healed and the poor have the gospel preached unto them. How much they need it may be gathered from the following quotation from Dr. McCartee's reply to the 3rd question. "I judge the mortality to be great (of lying-in women) because of the great quantity of locks of women's hair I have seen in certain temples. According to the Buddists' belief, women who die in parturition or within the month, go to the hell called the Bloody Lake, and can only get their heads above the surface when certain bells in certain Buddists' temples are tolled. On these occasions every one of these women, a lock of whose hair is fastened inside of the bell, has her head raised up for a short time above the surface of the Bloody Lake. Of course, the bouzes make their friends pay well for this privilege."

JULY, 1884. M. H. S.

App'mt	Medical Missionaries.	Medical Alma Mater.
1869	Dr. Clara A. Swain,	W. Med. Col. of Pennsylvania,
1873	" Nannie Monelle—Hansell,	" " " of N. Y. Infirmary,
1873	" Lucinda L. Combs–Strittmater	" " " of Pennsylvania,
1874	" Letitia Mason—Quine,	" " " of Chicago,
1874	" Anna J. Lore—McGrew,	Michigan University,
1874	" Sigourney Trask,	W. Med. Col. of N. Y. Infirmary,
1876	" Lucilla H. Green—Cheney, *	" " " of Pennsylvania,
1877	" Leonora Howard,	Michigan University,
1878	" Henrietta B. Woolston,	W. Med. Col. of Pennsylvania,
1878	" Julia A. Sparr,	Michigan University,
1879	" Kate E. Bushnell,	W. Med. Col. of Chicago,
1880	" Ella Gilchrist, *	" " " " "
1882	" Estella Aker,	" " " " "
1883	" Laura Hyde,	" " " " "
1883	" Florence N. Hamisfar,	
1883	" Catharine Cory,	Michigan University,
1883	" Anna Jones—Thoburn,	W. Med. Col. of Pennsylvania,
1883	" S. K. Cummings,	" " " of Chicago,
1884	" Hoag,	
1884	" Mary Christiancy,	W. Med. Col. of Pennsylvania,
1884	" Mildred Philips,	" " " " "
	All the above were supported by the W. F. M. S. of the M. E.	
	CO-OPERATING WITH THE AMERICAN BOARD	
1871	Dr. Mary L. Wadsworth,	W. Med. Col. of Pennsylvania,
1873	" Sarah F. Norris,	" " " of New England, §
1876	" Emma Ogden,	" " " of Pennsylvania,
1881	" Mary A. Holbrook,	Michigan University,
1881	" Virginia C. Murdock,	" "
	UNDER THE CARE OF THE BOARD OF FOREIGN	
1872	Dr. P. A. Brink,	Mrs. Lozier's School,
1873	" Sara C. Seward,	W. Med. Col. of Pennsylvania,
1877	" S. J. Anderson,	" " " of N. Y. Infirmary,
1878	" A. D. Kelsey,	" " " " " "
1882	" Mary E. Niles,	" " " " " "
1884	" Jessie E. Bell, A. B.,	" " " of Pennsylvania,
1884	" Mary H. Fulton, M. S.,	" " " " "
	UNDER THE CARE OF THE WOMAN'S	
1879	Dr. Ellen E. Mitchell,	W. Med. Col. of N. Y. Infirmary,
1879	" Caroline H. Daniels,	" " of Cleveland, O.,
1883	" Maria Collins—Douglas,	" " " of Pennsylvania,
1884	" Mary L. Van Meter,	" " " " "
1884	" Ruth McCown,	" " " " "
	UNDER THE WOMAN'S UNION MISSIONARY	
187–	Dr. Sara C. Seward,	W. Med. Col. of Pennsylvania,
1871	" Mary F. Seelye, *	" " " " "
1883	" M. Elizabeth Reifsnyder,	" " " " "
1883	Dr. Anna L. Kugler,	W. Med. Col. of Pennsylvania,
1884	Dr. Sarah L. Weintraub,	W. Med. Col. of Pennsylvania,
1884	" M. Helen Thompson,	" " " " "

* Deceased. § Merged into the Boston University.

Post Office Address.	Branches Supported By.	Former Residence.
Bareilly, India,	New England,	Castile, N. York.
Lucknow, India,	New York,	———, " "
Peking, China,	Philadelphia,	Casenovia, N. Y.
Kiu Kiang, China,	Cincinnati,	Normal, Illinois.
Moradabad, India,	New York,	Auburn, N. York.
Foochow, China,	" "	Spring Creek, Pa.
Bareilly, India,	New England,	Pennington, N. J.
Peking, China,	Northwestern,	Canada.
Moradabad, India,	Philadelphia,	Mount Holly, N. J.
Foochow, China,	Northwestern,	Muncie, Indiana.
Kiu Kiang, China,	" "	Evanston, Illinois.
" " "	" "	Chicago, "
Tientsin, China,	New England,	Bath, Maine.
Bareilly, India,	New York,	Clifton Spr'gs, Y. Y.
Hakodati, China,	Western,	Oswego, Kansas.
Foochow, "	New York,	———, Michigan.
Calcutta, India,	Parent Society.	Kingston, Ohio.
Kanayawa, Japan,	Northwestern,	
Under ap. for Chin Kiang, Chi'a		
Under appointment,		———, Michigan.
" "	M. E. Church, South,	California, Mo.

Church.—Those now in the work or on leave of absence still are.

OF COMMISSIONERS FOR FOREIGN MISSIONS.

Constantinople,	Now wife of Dr. John Bas-	Hendiker, N. H.
Bombay, India,	sian of Broosa, Turkey,	Plymouth, N. H.
Sholopoor, India,	Berkshire Co., Br. Mass.,	Pittsburg, Penna.
Tungchow, China, Peking P.O.,	Norfolk and Pilgrim,	E. Abington, Mass.
Kalgan, China,	W. Bd. of M. of the Interior,	Zanesville, Ohio.

MISSIONS OF THE PRESBYTERIAN CHURCH.

Futtehgurh, India.	" Lacked a proper spirit,"	Ret'ned to U. S. '74
Allahabad, India.	Was received from W. U. M. S.	Auburn, N. Y.
Chefoo, China,	Health failed,	———, "
Tungchow, "	Ret'nd in 1881–health impair'd	———, "
Nanking, "		———, "
Under appointment for China,		Saltsburg, Penna.
" " " "		Ashland, Ohio.

BAPTIST FOREIGN MISSIONARY SOCIETY.

Maulmain, Br. Burmah,		———, Penna.
Swatow, China,		
Ragoon, Burmah,		Burmah.
Under appointment,		"
Under appointment for China,	Baptist Church, South,	Gordonsville, Va.

SOCIETY OF AMERICA FOR HEATHEN LANDS.

Transf'rd to Presby. Bd. in 1873		
Calcutta, India,	Died June 9, 1875, aged 28 yrs.	Cleveland, Ohio.
Shanghai, China,		Liverpool, Penna.
Guntoor, India,	Lutheran Church,	Ardmore, Penna.
Damascus, Syria,	Episcopal Church,	Jerus'lm, Palestine.
Under appointment for China,	" "	Zanesville, Ohio.

P. S.—Dr. Florence N. Hamisfar graduated from "School of Medicine Boston University."

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